

AMENDED IN SENATE MARCH 24, 2003

**SENATE BILL**

**No. 142**

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**Introduced by Senator Alpert**

February 6, 2003

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An act to add Section 12693.983 to the Insurance Code, *and to add Section 14011.65 to the Welfare and Institutions Code*, relating to the Healthy Families Program.

LEGISLATIVE COUNSEL'S DIGEST

SB 142, as amended, Alpert. *Medi-Cal to Healthy Families Accelerated Enrollment Program.*

Existing law establishes the Healthy Families Program, administered by the Managed Risk Medical Insurance Board, to arrange for the provision of health care, dental, and vision coverage to eligible children meeting certain household income requirements. Existing law authorizes bridge programs which evaluate the eligibility of child currently in the program for enrollment in Medi-Cal and bridge programs which evaluate the eligibility of child currently enrolled in Medi-Cal for enrollment in the program. Under existing law, the Healthy Families Program becomes inoperative on January 1, 2004.

*This bill would create the Medi-Cal to Healthy Families Accelerated Enrollment Program that would make children meeting specified criteria eligible for health, dental, and vision coverage under the Healthy Families Program. The bill would require the board to adopt regulations necessary to implement the program. The bill would require the board to submit plan amendments to the federal government that are necessary to ensure full federal financial participation in the program. The bill would require each county to include its costs of implementing the program in its annual Medi-Cal administrative budget request. The*

*bill would provide that the program would be implemented only if federal funding is obtained. Because the bill would place additional requirements on county government agencies, the bill would impose a state-mandated local program.*

*The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement, including the creation of a State Mandates Claims Fund to pay the costs of mandates that do not exceed \$1,000,000 statewide and other procedures for claims whose statewide costs exceed \$1,000,000.*

*This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to these statutory provisions.*

~~This bill would require the board and the State Department of Health Services to establish a process for a county Medi-Cal eligibility staff member to authorize eligibility for a child in the Healthy Families program if the child meets all the Healthy Families program eligibility requirements. The bill would require the process to include a means for a county to provide the prospective enrollee with all necessary information regarding the Healthy Families Program.~~

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: ~~no~~ yes.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 12693.983 is added to the Insurance
- 2 Code, to read:
- 3 12693.983. ~~The board and the State Department of Health~~
- 4 ~~Services shall work in consultation with the County Welfare~~
- 5 ~~Directors Association to establish a process by which county~~
- 6 ~~Medi-Cal eligibility staff can authorize eligibility for the Healthy~~
- 7 ~~Families program for children who are eligible for Medi-Cal with~~
- 8 ~~a share of cost and who meet all other program eligibility~~
- 9 ~~requirements. The process shall include a means for the county to~~
- 10 ~~provide all necessary information to the child and to the program~~
- 11 ~~in order to complete the child's enrollment in the program.~~
- 12 12693.983. *The board shall adopt regulations to implement*
- 13 *the Medi-Cal to Healthy Families Accelerated Enrollment*

1 *program established under Section 14011.65 of the Welfare and*  
2 *Institutions Code. If the board determines that one or more*  
3 *amendments to the State Child Health Plan are necessary to ensure*  
4 *full federal financial participation in the provisions of the*  
5 *program, the board shall prepare and submit requests for the plan*  
6 *amendments to the federal government.*

7 *SEC. 2. Section 14011.65 is added to the Welfare and*  
8 *Institutions Code, to read:*

9 *14011.65. (a) The Medi-Cal to Healthy Families Accelerated*  
10 *Enrollment Program is hereby established to provide any child*  
11 *who meets the criteria set forth in subdivision (b) with temporary*  
12 *health benefits while his or her application is forwarded to the*  
13 *Healthy Families Program established under Part 6.2*  
14 *(commencing with Section 12693) of Division 2 of the Insurance*  
15 *Code.*

16 *(b) (1) Any child who meets all of the following requirements*  
17 *shall be eligible for temporary health benefits funded by Title XXI*  
18 *of the Social Security Act, known as the State Children's Health*  
19 *Insurance Program:*

20 *(A) The child, or his or her parent or guardian, either:*

21 *(i) Submits an application for the Medi-Cal Program directly*  
22 *to the county.*

23 *(ii) Has submitted an application for the Medi-Cal Program to*  
24 *single point of entry as defined in subdivision (e) of Section*  
25 *14011.6, and has been granted accelerated enrollment by the*  
26 *single point of entry pursuant to Section 14011.6.*

27 *(B) The child is not receiving Medi-Cal benefits at the time that*  
28 *the application is submitted, with the exception of accelerated*  
29 *enrollment provided pursuant to Section 14011.6.*

30 *(C) The child is eligible for full-scope Medi-Cal benefits with*  
31 *a share of cost.*

32 *(D) The child is under 19 years of age.*

33 *(E) The child has family income at or below 250 percent of the*  
34 *federal poverty level.*

35 *(F) The child is not otherwise excluded under the definition of*  
36 *a targeted low-income child under subsections (b)(1)(B)(ii),*  
37 *(b)(1)(C), and (b)(2) of Section 2110 of the Social Security Act (42*  
38 *U.S.C. Secs. 1397jj(b)(1)(B)(ii), 1397jj(b)(1)(C), and*  
39 *1397jj(b)(2)).*

1 (G) The child, or his or her parent or guardian, gives or has  
2 given consent for the application to be forwarded to the Healthy  
3 Families Program.

4 (2) The temporary benefits provided under this section shall be  
5 effective on the date that the county finds that the child meets all  
6 of the criteria in paragraph (1) of subdivision (b) of this section.  
7 The benefits shall terminate on the date that the child is  
8 discontinued from the state Medical Eligibility Data System due to  
9 his or her full enrollment in the Healthy Families Program or  
10 ineligibility for the Healthy Families Program.

11 (3) The temporary health benefits provided under this section  
12 shall be identical to the benefits provided to children who receive  
13 full-scope Medi-Cal benefits without a share of cost and shall only  
14 be made available through a Medi-Cal provider.

15 (c) Notwithstanding Chapter 3.5 (commencing with Section  
16 11340) of Part 1 of Division 3 of Title 2 of the Government Code,  
17 the department shall, without taking any regulatory action,  
18 implement this section by means of all-county letters. The  
19 department, in consultation with the Managed Risk Medical  
20 Insurance Board and representatives of the local agencies that  
21 administer the Medi-Cal program, consumer advocates, and other  
22 stakeholders, shall develop and distribute the policies and  
23 procedures, including any all-county letters, necessary to  
24 implement this section.

25 (d) If the department determines that one or more state plan  
26 amendments are necessary to ensure full federal financial  
27 participation in the provisions of this section, the department shall  
28 prepare and submit requests for the state plan amendments to the  
29 federal government.

30 (e) This section shall not be implemented until the later of the  
31 date that the state receives approval of all necessary state plan  
32 amendments, or six months after this section is enacted.

33 (f) Each county shall include its cost of implementing this  
34 section in its annual Medi-Cal administrative budget request  
35 submitted to the department.

36 (g) This section shall be implemented only if, and to the extent  
37 that, federal financial participation is available for the services  
38 provided. This section shall be implemented in a manner consistent  
39 with any federal approval.

1     (h) *This section shall become inoperative if an unappealable*  
2 *court decision or judgment determines that any of the following*  
3 *apply:*

4     (1) *The provisions of this section are unconstitutional under the*  
5 *United States Constitution or the California Constitution.*

6     (2) *The provisions of this section do not comply with the State*  
7 *Children’s Health Insurance Program, as set forth in Title XXI of*  
8 *the Social Security Act.*

9     SEC. 3. *Notwithstanding Section 17610 of the Government*  
10 *Code, if the Commission on State Mandates determines that this*  
11 *act contains costs mandated by the state, reimbursement to local*  
12 *agencies and school districts for those costs shall be made*  
13 *pursuant to Part 7 (commencing with Section 17500) of Division*  
14 *4 of Title 2 of the Government Code. If the statewide cost of the*  
15 *claim for reimbursement does not exceed one million dollars*  
16 *(\$1,000,000), reimbursement shall be made from the State*  
17 *Mandates Claims Fund.*

